PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/599,610

CLAIMS AS FILED - PART I								SMALL ENTITY OTHER THAN				
			(Column 1)			Column 2)	lumn 2)			OR	SMALL E	NTITY
U.S.	NATIONAL S	TAGE FEES	,					RATE	FEE		RATE	FEE
BASIC FEE			SMALL ENT. = \$ 150		LARGE ENT. = \$ 300		ВА	SIC FEE		OR	BASIC FEE	<i>3</i> 00
EXAMINATION FEE			Satisfies PCT Article 33(1)- (4) = \$50 / \$ 100		All other situations = \$ 100 / \$ 200		EX	AM. FEE			EXAM. FEE	<i>2</i> 0
SEARCH FEE			U.S. is ISA = \$ 50 / \$ 100 ALL other countries = \$ 200 / \$ 400		ALL other situations = \$ 250 / \$ 500		SE	ARCH FEE			SEARCH FEE	400
FEE FOR EXTRA SPEC. PGS.			minus 100 =		/ 50 =		×	(\$ 125 =			X \$ 250 =	
TOTAL CHARGEABLE CLAIMS			33 minus 20 = *		• 13		2	X \$ 25 =		OR	X \$ 50 =	650
INDEPENDENT CLAIMS				minus 3 =	*		×	(\$ 100 =		OR	X \$ 200 =	
MUL	TIPLE DEPEN	DENT CLAIM PRE	SENT	-				· \$ 180 =		OR	+ \$ 360 =	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	1550
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
AMENDMENT A	33	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* 33	Minus	** 3	3	= O		X \$ 25 =		OR	X \$ 50 =	
	Independent	. 2	Minus	ئ ***	3	= 0	L)	(\$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	+ \$ 180 =		OR	+ \$ 360 =	
							ТС	FEE		OR	TOTAL ADDIT.	
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		=	>	(\$100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	+ \$ 180 =		OR	+ \$ 360 =	
							TO	TAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. Barbara Campbell, PCT National Stage Division												

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

If the entry in column 1 is less than the entry in column 2, write "0" in column 3